

# EXHIBIT A

**LICENSE TO CARRY G 13 - S**  
**FIREARMS WORK SHEET BPD SWORN ONLY**Name: HIGHOWER, stacey  
Last First MiddleDate of Birth: 1/1/1978

Maiden Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Residence: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Naturalized Citizen: Yes yes / No: noDate of Naturalization: 1/1/1978

Drivers License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

M/F? F Hair: BROWN Eyes: BROWNWt: 160 Ht: 5-05 Complexion: MEDRank: 09 / Patrol Officer

Identification (ID) Number: \_\_\_\_\_

Assignment: B2Date Of Appointment: 6/10/1998

Work Phone: \_\_\_\_\_

Are You Renewing An Existing License? ☒ Yes ☐ No

License Number: \_\_\_\_\_

Issued By: \_\_\_\_\_

Expiration Date: 1/1/1998

Restrictions: \_\_\_\_\_

Are There Any Complaints Or Charges Pending Against

You? NOAre You Currently Under Suspension? NODo You Carry A Department Firearm? ☒ Yes ☐ No

Are You Currently Subject To Any Abuse Orders Issued

Under Chapter 208A or 209A Of The Massachusetts

General Laws? ☐ Yes ☒ No

Order Number: \_\_\_\_\_

Issuing Court: \_\_\_\_\_

Issuance Date: \_\_\_\_\_

Application Date: 7/9/08AFIS Tracking # FBOS: 10078691AInterviewing Officer: ECSCriminal History Completed: ☒ Yes ☐ NoCriminal History Located? ☒ Yes ☐ NoDate Tracking Submitted: 7/9/08Date Tracking Returned: 7/20/08DMH Check Submitted: 7/9/08DMH Check Returned: DKCopy Of Department ID: Attached

Proof of Residency: Attached / Not Required

Firearms Safety Course Certificate: { } On File

{ } Attached { } Not Required

Applicant Printed (New Application): ☐ Yes ☒ No

Other Documents Attached or Required: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reviewed By IAD: multIAD Review Date: 7-30-08☒ This License Is Approved Without Restrictions (ALP).☐ This License Is Approved With The Following Listed

Restrictions: \_\_\_\_\_

Approved By: [Signature]License #: 12205751A

Issuance Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

☐ This License Is Denied For The Following

Reason(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Commissioner's Stamp:

[Signature]

Police Commissioner

# EXHIBIT B



Via First Class & Certified Mail  
Return Receipt No. 7005 3110 0002 4597 0688

One Schroeder Plaza, Boston, MA 02120-2014

08/20/2008

STACEY HIGHTOWER

DORCHESTER, MA 02124

RE: Revocation of LTC, License Number: 12203754A

Dear STACEY HIGHTOWER:

Please be advised that your license to carry (LTC) firearms, pursuant to the provisions of M.G.L. c. 140, § 131, is hereby:  
☒ revoked / forfeited

The reason(s) for this revocation is:

☒ you completed the application form untruthfully;

As a result of this revocation you shall, in accordance with M.G.L. c. 140, § 129D, without delay, deliver or surrender to the licensing authority where you reside your licenses to carry, and all firearms, large capacity feeding devices, rifles, shotguns and ammunition which you have in your possession, or which are owned by you. Failure to do so is a criminal offense. These items may be transferred from you to a licensed dealer, or to another person who may lawfully take possession of such items, but only after said items are surrendered to the licensing authority.

You have the right to appeal this decision within 90 days to the District Court with appropriate jurisdiction. Please contact us at any time if you have any questions concerning this matter.

Sincerely,

  
EDWARD F. DAVIS  
COMMISSIONER

cc: Commissioner of Probation,  
One Ashburton Place, Room 405. Boston, MA 02108